



## GALLATIN COUNTY SOLID WASTE MANAGEMENT DISTRICT

### Gallatin County Landfill at Logan, Montana

PO Box 461, Three Forks, MT 59752 PHONE: (406) 284 – 4029 FAX: (406) 582-2491

### WASTE TRACKING FORM

#### **Contractor/Consultant Information**

Name of Company \_\_\_\_\_  
Address of Contractor \_\_\_\_\_  
Phone Number \_\_\_\_\_ Contact Person \_\_\_\_\_

#### **Source of Waste**

Name of Company/Residence \_\_\_\_\_  
Address of Source \_\_\_\_\_  
Phone Number \_\_\_\_\_ Contact Person \_\_\_\_\_  
Type of Establishment (home, restaurant, garage, industry, car wash... \_\_\_\_\_  
\_\_\_\_\_

#### **Waste Hauler Information**

Company Name \_\_\_\_\_ Hauler ID # or Permit # \_\_\_\_\_  
Address/Phone \_\_\_\_\_  
Truck Capacity \_\_\_\_\_ (yards, gal) Truck License Number \_\_\_\_\_

#### **Waste Description**

Description of Waste \_\_\_\_\_  
Has waste been sampled? Yes \_\_\_\_\_ No \_\_\_\_\_  
Is waste a hazardous waste? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

#### **Gallatin County Solid Waste Management District Information**

Fee \$ \_\_\_\_\_ per \_\_\_\_\_ (tons, gallons, yards...)  
Amount \$ \_\_\_\_\_ Paid \_\_\_\_\_ OR Bill To \_\_\_\_\_  
Amount (volume) \_\_\_\_\_ (tons, gallons, yards...)  
Waste Placement: cell \_\_\_\_\_ C&D \_\_\_\_\_ Other \_\_\_\_\_  
Waste Acceptance Approved By \_\_\_\_\_ Date \_\_\_\_\_  
Waste Received By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Analytical Data Attached? Yes \_\_\_\_\_ No \_\_\_\_\_